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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on | Katie | |
| | your government-issued picture identification (for | First name | First name |
| | example, your driver's | L | |
| | license or passport). | Middle name | Middle name |
| | Bring your picture | , Mariani | |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| 2. | All other names you have used in the last 8 years | Katie Kurzawski | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4643 | |
| | | | |

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Case number (if known)

Debtor 1 Mariani, Katie L

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|--|---|---|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | |
| | | EINs | EINs | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | |
| | | 7512 W Bryn Mawr Ave Chicago, IL 60631-3036 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Cook | · · | | |
| | | County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |

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Document Case number (if known) Debtor 1 Mariani, Katie L

| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 | | | | | |
|-----------------------------|--|--|----------------|---|--|---|--|
| | choosing to file under | | | | | | |
| | | _ | hapter 11 | | | | |
| | | | hapter 12 | | | | |
| | | | hapter 13 | | | | |
| | | _ ` | | | | | |
| 8. | How you will pay the fee | • | about how yo | u may pay. Typica ey is submitting yo | lly, if you are paying the fee yours | with the clerk's office in your local court for more details elf, you may pay with cash, cashier's check, or money order ttorney may pay with a credit card or check with a | |
| | | | | the fee in instal | | , sign and attach the Application for Individuals to Pay The | |
| | | | I request that | t my fee be waive o, waive your fee, | ed (You may request this option of and may do so only if your income | only if you are filing for Chapter 7. By law, a judge may, but is a less than 150% of the official poverty line that applies to | |
| | | | | | able to pay the fee in installments ee Waived (Official Form 103B) a |). If you choose this option, you must fill out the <i>Application</i> and file it with your petition. | |
| 9. Have you filed for ■ No. | | | | | | | |
| | bankruptcy within the last 8 years? | — N. | | | | | |
| | o years. | □ 16 | District | | When | Case number | |
| | | | District | | When | Case number | |
| | | | District | | When | Case number | |
| 10. | Are any bankruptcy cases | ■ No |) | | | | |
| | pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Ye | es. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your | | Go to I | ine 12. | | | |
| | residence? | ■ Ye | es. Has yo | our landlord obtain | ed an eviction judgment against | you? | |
| | | | | No. Go to line 12 | 2. | | |
| | | | | Yes. Fill out <i>Initia</i> bankruptcy petition | | adgment Against You (Form 101A) and file it with this | |

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Document Page 4 of 44 Case number (if known) Debtor 1 Mariani, Katie L Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate 13. Are you filing under Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 you a small business U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

Do you own or have any property that poses or is alleged to pose a threat of Yes. imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

| _ | ٠ | •0. | |
|---|---|-----|--|
| | | | |
| | | | |
| | | | |

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1

Mariani, Katie L

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Mariani, Katie L | | Document | | Case numb | er (if known) |
|------|--|---|--|---|---|---|
| Part | 6: Answer These Quest | ons for Re | eporting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily cons individual primarily for a persona | | | ned in 11 U.S.C.§ 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16b. | Are your debts primarily busing for a business or investment or to | ness debts? Busine through the operation | ess debts are debts to of the business or i | that you incurred to obtain money nvestment. |
| | | | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts you owe t | that are not consume | er debts or business | debts |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. | Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | I am filing under Chapter 7. Do y paid that funds will be available t | | | ty is excluded and administrative expenses are |
| | administrative expenses | | ■ No | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | ☐ Yes | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-1 □ 200-9 | 99 | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,0 |) | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 |
| 19. | How much do you estimate your assets to be worth? | □ \$100, | 550,000 101 - \$100,000 1001 - \$500,000 1001 - \$1 million | \$1,000,001 \$10,000,001 \$50,000,001 \$100,000,00 | - \$50 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| 20. | How much do you estimate your liabilities to be? | = \$100, | 550,000 001 - \$100,000 001 - \$500,000 001 - \$1 million | \$1,000,001 - \$10,000,001 \$10,000,001 \$50,000,001 \$100,000,000 | - \$50 million | \$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion |
| Part | 7: Sign Below | | | | | |
| For | you | I have ex | amined this petition, and I declare | under penalty of perj | jury that the informat | tion provided is true and correct. |
| | | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, Unit States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | |
| | | | | | | n attorney to help me fill out this document, I |
| | | I request | relief in accordance with the cha | apter of title 11, Unite | ed States Code, spe | ecified in this petition. |
| | | case can | | | | property by fraud in connection with a bankruptcy . 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | Mariani e of Debtor 1 | | Signature of Debto | or 2 |
| | | Executed | April 14, 2018 MM / DD / YYYY | | Executed on MN | M / DD / YYYY |
| | | | | | | |

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Debtor 1 Mariani, Katie L

For your attorney, if you are

If you are not represented by

an attorney, you do not need

represented by one

to file this page.

petition is incorrect.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the

| /s/ Jeffrey S. Harris | Date | April 14, 2018 |
|--|---------------|--------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| | | |
| Jeffrey S. Harris | | |
| Printed name | | |
| Law Offices of Jeffrey S Harris | | |
| Firm name | | |
| | | |
| 1701 S 1st Ave Ste 202 | | |
| Maywood, IL 60153-2400 | | |
| Number, Street, City, State & ZIP Code | | |
| (700) 040 0000 | | 1-#@Mit-Oit-1 |
| Contact phone (708) 343-9800 | Email address | Jeff@WindyCityLawyer.com |
| 6197483 | | |
| Bar number & State | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. $_{B201B\;(Form\;2GBS; 2/198-10941}$

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Desc Main

United States Bankruptcy Court

Northern District of Illinois, Eastern Division

| IN RE: | | Case No. |
|------------------|-----------|-----------|
| Mariani, Katie L | | Chapter 7 |
| | Debtor(s) | • |

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)

| UNDER § 342 | (b) OF THE BANKRUPTCY (| CODE |
|--|--|--|
| Certificate of [Non | -Attorney] Bankruptcy Petition | Preparer |
| I, the [non-attorney] bankruptcy petition preparer signinotice, as required by § 342(b) of the Bankruptcy Code | | fy that I delivered to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition I Address: | Preparer | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) |
| X | | (Required by 11 U.S.C. § 110.) |
| Signature of Bankruptcy Petition Preparer of officer, partner whose Social Security number is provided above | | |
| C | Certificate of the Debtor | |
| I (We), the debtor(s), affirm that I (we) have received a | and read the attached notice, as requi | ared by § 342(b) of the Bankruptcy Code. |
| Mariani, Katie L | Χ /s/ Katie L Mariani | 4/14/2018 |
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | x | |
| | Signature of Joint I | Debtor (if any) Date |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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| | | Document | Page 13 of 44 | | |
|---|--|--|---------------------------------|-------------------------------|--------------------------------------|
| Fill in this info | rmation to identify your | case and this filing: | | | |
| Debtor 1 | Katie L Mariani | | | | |
| 202101 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS, EASTERN DIVISIO | N | |
| 0 | | | | | |
| Case number | | | _ | | ☐ Check if this is an amended filing |
| | | | | | amended ming |
| | | | | | |
| Official F | orm 106A/B | | | | |
| Schedu | le A/B: Prop | ertv | | | 12/15 |
| | | e items. List an asset only once. If | an asset fits in more than or | ne category list the asset in | |
| hink it fits best. nformation. If me | Be as complete and accura ore space is needed, attach | te as possible. If two married peopl a separate sheet to this form. On th | e are filing together, both are | e equally responsible for s | upplying correct |
| Answer every qu | estion. | | | | |
| Part 1: Describ | e Each Residence, Building | , Land, or Other Real Estate You O | wn or Have an Interest In | | |
| Do you own o | r have any legal or equitable | e interest in any residence, building | land or similar property? | | |
| . Do you own o | i nave any legal of equitable | e interest in any residence, building | , land, or similar property: | | |
| No. Go to P | art 2. | | | | |
| ☐ Yes. Where | e is the property? | | | | |
| | | | | | |
| Part 2: Describ | e Your Vehicles | | | | |
| □ No ■ Yes | nucks, tractors, sport at | ility vehicles, motorcycles | | | |
| | T | | | Do not doduct socured | claims or exemptions. Put |
| 3.1 Make: | Toyota | Who has an interest in the | ne property? Check one | the amount of any secu | red claims on Schedule D: |
| Model: | Camry | Debtor 1 only | | Creditors Who Have Cl | laims Secured by Property. |
| Year: | 2017 ate mileage: 10 | Debtor 2 only | | Current value of the | Current value of the |
| Other info | | Debtor 1 and Debtor 2 At least one of the deb | | entire property? | portion you own? |
| | | At least one of the deb | tors and another | | |
| | | Check if this is comm (see instructions) | nunity property | \$20,000.00 | \$20,000.00 |
| | | | | | |
| 1 Watercraft | piroraft motor homos A | ΓVs and other recreational vehi | clas other vehicles and | acossorios | |
| | | nal watercraft, fishing vessels, sno | | | |
| _ | | | | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| | | | | | |
| | | | | | |
| | | ou own for all of your entries fraction from the fraction of the first section of the form | | | \$20,000.00 |
| ., ou nave a | | | | | <u> </u> |
| Part 3: Describ | e Your Personal and Hous | ehold Items | | | |
| | | able interest in any of the follow | ing items? | | Current value of the |
| - | | | | | portion you own? |
| | | | | | Do not deduct secured |

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property page 1

| | Case 18- | | Doc 1 | Filed 04/14/18 Document | Entered 04/14/1 Page 14 of 44 Case | 8 16:00:01 | Desc Main |
|----------------------------------|--|-----------------------|-----------------|--|--|---------------------|--|
| Debtor 1 | Mariani, Kat | ie L | | | Case | number (if known) | |
| ■ Yes. | Describe | househ chairs | old furntur | re, couch, bedreeo | m furniture, kitchen tab | le and | \$750.00 |
| 7. Electron Examp | les: Televisions ar | | | ereo, and digital equipm a players, games | ent; computers, printers, sca | nners; music collec | ctions; electronic devices |
| ☐ Yes. | Describe | | | | | | |
| Examp. No | ibles of value les: Antiques and collections, n | | | s, or other artwork; book | ks, pictures, or other art object | ts; stamp, coin, or | baseball card collections; other |
| Examp. No | nent for sports ar les: Sports, photog instruments | | | ner hobby equipment; bi | cycles, pool tables, golf clubs | , skis; canoes and | kayaks; carpentry tools; musical |
| ■ No | | s, shotguns, | , ammunition, | , and related equipmen | t | | |
| □ No | <i>pl</i> es: Everyday clo | thes, furs, l | eather coats, | designer wear, shoes, a | accessories | | |
| ■ Yes. | Describe | usual c | omplemen | t of women's cloth | ina | | \$750.00 |
| | | | | | g | | <u></u> |
| □ No | <i>ples:</i> Everyday jew | <i>v</i> elry, costur | me jewelry, en | ngagement rings, weddii | ng rings, heirloom jewelry, wat | tches, gems, gold, | silver |
| ■ Yes. | Describe | misc ite | ems of limit | ted value jewelry, e | earings, rings, bracelett | е | \$100.00 |
| Exam No Yes. 14. Any of | arm animals ples: Dogs, cats, b Describe ther personal and | d househol | ld items you | did not already list, ir | ncluding any health aids yo | u did not list | |
| | | | | om Part 3, including a | ny entries for pages you ha | ve attached for | \$1,600.00 |
| Part 4: De | escribe Your Finan | cial Assets | | | | | |
| Do you ov | wn or have any lo | ∍gal or equ | itable intere | st in any of the follow | ing? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. Cash <i>Exam</i> ☐ No | pples: Money you h | ave in your | wallet, in your | r home, in a safe deposi | t box, and on hand when you | file your petition | |

Official Form 106A/B Schedule A/B: Property page 2

| | | Case 18-10 | 941 Doc 1 | |)4/14/18 ıment | | Entered age 15 | | /18 16:00:01 | Desc Main | |
|-------|----------------------------|--|--|----------------|-------------------|--------|-------------------|--------------|-----------------------|-----------------------|----------|
| Deb | otor 1 | Mariani, Katie I | <u>L</u> | Doce | ımeni | | aye 15 | Ca | se number (if known) | | |
| | Yes | | | | | | | | cash | | \$100.00 |
| | | | | | | | | | | | |
| _ | Examp | | gs, or other financia ou have multiple ac | | | | | | nions, brokerage hou | ses, and other simila | r |
| _ | ⊒ No ■ Yes | | | | Institution r | nam | e: | | | | |
| | | | 474 Chaoleine | | Pank of | ۸m | orioo and | ITCE bon | ako | | \$200.00 |
| | | | 17.1. Checking | Account | Bank of A | Ame | erica and | I ICF Dar | iks | <u> </u> | \$200.00 |
| _ | | mutual funds, or poles: Bond funds, inve | | | e firms, mone | ey ma | arket accour | nts | | | |
| | Yes | | Institution or | | - | | | | | | |
| | | | 14 shares | or stock ir | n Hyatt | | | | | | \$900.00 |
| _ | Non-pu joint ve ■ No | • | and interests in ir | ncorporated | and uninco | orpor | rated busin | nesses, inc | cluding an interest | in an LLC, partners | hip, and |
| | ☐ Yes. | Give specific inform | ation about them Name of entity: | | | | | % | of ownership: | | |
| | <i>Non-ne</i> ■ No | able instruments inclegotiable instruments Give specific informa | are those you cann | | | | | | | | |
| _ | | nent or pension accoles: Interests in IRA | | 01(k), 403(b), | thrift savings | gs ac | counts, or c | other pensi | ion or profit-sharing | plans | |
| | ☐ Yes. I | List each account se | parately. Type of account: | | Institution r | name | e: | | | | |
| 22 ! | Securit | y deposits and pre | | | | | | | | | |
| _ | Your sh | hare of all unused de bles: Agreements with | posits you have mad | | | | | | | , or others | |
| | | | | | Institution r | nam | e or individu | lual: | | | |
| | Annuiti ■ No | es (A contract for a p | periodic payment of | money to you | u, either for lif | ife or | for a number | er of years) |) | | |
| | ☐ Yes | lssue | r name and descrip | otion. | | | | | | | |
| 2 | 26 U.S.0 | s in an education IF C. §§ 530(b)(1), 529/ | | | d ABLE prog | gran | n, or under | a qualifie | d state tuition prog | ram. | |
| | ■ No □ Yes | Institu | ution name and desc | cription. Sepa | arately file the | e rec | ords of any | interests.1 | 1 U.S.C. § 521(c): | | |
| | Trusts, ■ No | equitable or future | interests in prope | erty (other th | nan anything | ng lis | ted in line | 1), and rig | hts or powers exer | cisable for your be | nefit |
| | ☐ Yes. | Give specific inform | ation about them | | | | | | | | |
| 26. I | | s, copyrights, trade bles: Internet domain | | | | | | ements | | | |

Official Form 106A/B Schedule A/B: Property page 3

 $\hfill \square$ Yes. Give specific information about them...

| | | Case 18-10 | 941 | Doc 1 | | Entered 04/14/18 16:00:01 | Desc Main |
|---------------------------------------|--|--|--|---|---|---|---|
| De | btor 1 | Mariani, Katie | L | | Document | Page 16 of 44 Case number (if known) | |
| | Examp ■ No | es, franchises, and oles: Building permits Give specific inform | s, exclus | ive licenses, d | | oldings, liquor licenses, professional licenses | |
| Мо | oney or | property owed to y | ou? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 1 | ■ No | unds owed to you | ation abc | out them, inclu | iding whether you already | y filed the returns and the tax years | |
| 1 | Examp ■ No | support oles: Past due or lun Give specific inform | | , | sal support, child suppo | rt, maintenance, divorce settlement, property s | settlement |
| 1 | Examp ■ No | imounts someone oles: Unpaid wages, unpaid loans y Give specific inform | disability ou made | insurance pa | | s, sick pay, vacation pay, workers' compensati | ion, Social Security benefits; |
| 31. | Interes Examp ■ No | ts in insurance pol | licies y, or life i compan | | , | SA); credit, homeowner's, or renter's insurance Beneficiary: | Surrender or refund value: |
| 32. | | erest in property t | hat is du | | someone who has died | l rance policy, or are currently entitled to receive p | |
| | died. ■ No | | | irusi, expect p | , coosed its in a me modi | ance policy, or are currently entitled to receive p | property because someone has |
| 33. | died. No Yes. Claims Examp | Give specific inform | nation es, when | ther or not y | | or made a demand for payment | property because someone has |
| 33. | died. No Yes. Claims Examp No Yes. Other c | Give specific inform against third parti les: Accidents, emp | es, where the state of the stat | t her or not y disputes, ins | ou have filed a lawsuit urance claims, or rights | or made a demand for payment | |
| 33. | died. No Yes. Claims Examp No Yes. Other o No Yes. Any fin | Give specific inform against third parti bles: Accidents, emp Describe each clain contingent and unli | es, where bloyment m | ther or not y disputes, ins d claims of e | ou have filed a lawsuit urance claims, or rights | or made a demand for payment to sue | |
| 33. 34. 35. | died. No Yes. Claims Examp No Yes. Other co No Yes. Any fin No Yes. Add t | Give specific inform against third partiples: Accidents, emp Describe each claim contingent and unline Describe each claim ancial assets your Give specific inform he dollar value of a | es, where the state of the stat | ther or not you disputes, inside the claims of earlier and the claims | ou have filed a lawsuit urance claims, or rights every nature, including | or made a demand for payment to sue | |
| 33. 34. 35. 35. | died. No Yes. Claims Examp No Yes. Other of No Yes. Any fin No Yes. Add t Part 4 | Give specific inform against third partiples: Accidents, employees: Accidents, employees each claim contingent and unlinearity and assets your give specific informulation. Give specific informulation the dollar value of a land the continue of a land | es, when the state of the state | ther or not y disputes, ins d claims of e already list ur entries fro | ou have filed a lawsuit urance claims, or rights every nature, including | or made a demand for payment to sue counterclaims of the debtor and rights to s | et off claims |
| 33. 34. 35. 35. Par | died. No Yes. Claims Examp No Yes. Other o No Yes. Any fin No Yes. Add t Part 4 | Give specific informagainst third partiples: Accidents, employers accidents and unlinearible each claimancial assets your Give specific information the dollar value of a write that numbers accide any Business | es, where the second of the se | ther or not y disputes, ins d claims of e already list ur entries fro | ou have filed a lawsuit urance claims, or rights every nature, including | or made a demand for payment to sue counterclaims of the debtor and rights to s y entries for pages you have attached for | et off claims |
| 33. 34. 35. 36. Par | died. No No Yes. Claims Examp No Yes. Other co No Yes. Any fin No Yes. Add t Part 4 | Give specific informagainst third partiples: Accidents, employers accidents and unlinearible each claimancial assets your Give specific information the dollar value of a write that numbers accide any Business | es, where the second of the se | ther or not y disputes, ins d claims of e already list ur entries fro | ou have filed a lawsuit urance claims, or rights every nature, including om Part 4, including any | or made a demand for payment to sue counterclaims of the debtor and rights to s y entries for pages you have attached for | et off claims |

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Case number (if known) Document Debtor 1 Mariani, Katie L Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$20,000.00 57. Part 3: Total personal and household items, line 15 \$1,600.00 58. Part 4: Total financial assets, line 36 \$1,200.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$22,800.00 Copy personal property total \$22,800.00

\$22,800.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

Case 18-10941 Doc 1 Filed 04/14/18 Entered 04/14/18 16:00:01 Desc Main

| Fill in this information to identify your case: |
|---|
| Till in this information to identify your case. |
| Debtor 1 Katie L Mariani |
| First Name Middle Name Last Name |
| Debtor 2 |
| (Spouse if, filing) First Name Middle Name Last Name |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION |
| Case number |
| (if known) |
| |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| | Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | |
|---|---|---|-----|---|------------------------------------|--|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | household furnture, couch, bedreeom furniture, kitchen table | \$750.00 | | \$750.00 | 735 ILCS 5/12-1001(b) | |
| а | and chairs Line from Schedule A/B. 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | usual complement of women's | \$750.00 | | \$750.00 | 735 ILCS 5/12-1001(a) | |
| | Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | misc items of limited value jewelry, earings, rings, bracelette | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) | |
| | Line from Schedule A/B. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | cash Line from Schedule A/B 16.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) | |
| | Elite Holli Genedale AVE. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Bank of America and TCF banks Line from Schedule A/B 17.1 | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) | |
| | Line Holli Contocale 7 (2) TTT | | | 100% of fair market value, up to any applicable statutory limit | | |
| | | | | | | |

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| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|---|--|---|---------|---|------------------------------------|
| | | Copy the value from Check only one box for each exemption. Schedule A/B | | | |
| | 14 shares or stock in Hyatt | \$900.00 | | \$900.00 | 735 ILCS 5/12-1001(b) |
| L | Life Holli Schedule AVB. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Are you claiming a homestead exemption o | | | on or ofter the date of adjustment) | |
| (| Subject to adjustment on 4/01/19 and every 3 y ■ No | years arter that for case: | s IIICu | on or after the date of adjustment.) | |

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| Ca | 136 10-10341 | Document | Page 20 | of 111 | JU.UI DESCI | παιιι |
|--|--|--|-----------------|--|--|-------------------|
| Fill in this inforn | nation to identify you | | - Ot It . 7 (7 | · · · · · · · · · · · · · · · · · · · | | |
| Debtor 1 | Katie L Mariani | | | | | |
| | First Name | Middle Name | Last Name | |) | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | nkruptcy Court for the: | NORTHERN DISTRICT OF ILLIN | IOIS, EASTE | ERN DIVISION | | |
| Case number _ (if known) | | | | | - | c if this is an |
| Official Forn | n 106D | | | | | |
| Schedule | D: Creditors | Who Have Claims S | ecured | by Property | У | 12/15 |
| needed, copy the A known). 1. Do any creditors | Additional Page, fill it out | | is form. On the | e top of any additional | pages, write your name | |
| _ | this box and submit the all of the information b | is form to the court with your other sch | edules. You h | nave nothing else to rep | oort on this form. | |
| | | GIOW. | | | | |
| · | II Secured Claims | | | Column A | Column B | Column C |
| for each claim. If m | ore than one creditor has | nore than one secured claim, list the credite a particular claim, list the other creditors in cal order according to the creditor 's name. | n Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| 2.1 Toyota M | otor Credit | Describe the property that secures the | e claim: | \$25,644.00 | \$20,000.00 | \$5,644.00 |
| PO Box 9 Cedar Ra 52409-000 Number, Street | 786 pids, IA | As of the date you file, the claim is: Chapply. Contingent Unliquidated Disputed | neck all that | | | |
| Who owes the de | ebt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only □ Debtor 2 only | | An agreement you made (such as mo car loan) | ortgage or secu | ired | | |
| ☐ Debtor 1 and De | ebtor 2 only he debtors and another | ☐ Statutory lien (such as tax lien, mechan ☐ Judgment lien from a lawsuit | anic's lien) | | | |
| Check if this cl community de | | ☐ Other (including a right to offset) | | | | |
| Date debt was inc | urred <u>2017-09</u> | Last 4 digits of account numbe | r <u>0001</u> | | | |
| | age of your form, add th | umn A on this page. Write that number I e dollar value totals from all pages. | here: | \$25,644 \$25,644 | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

Case 18-10941 Doc 1 Filed 04/14/18 Entered 04/14/18 16:00:01 Desc Main

| | | Document | Page 2 | 1 of 44 | | |
|-------------------------------------|--|---|--------------------------------|---|------------------------------------|--|
| Fill in th | is information to identify your | case: | | | | |
| Debtor 1 | Katie L Mariani | | | | | |
| 20210. | First Name | Middle Name | Last Name | |) | |
| Debtor 2 | | | | | | |
| (Spouse if, | filing) First Name | Middle Name | Last Name | | | |
| United S | States Bankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS, EAS | TERN DIVISION | l | |
| 0 | b | | | | | |
| Case nu (if known) | imber | | | | По | heck if this is an |
| | | | | | _ | mended filing |
| | | | | | | · · |
| | al Form 106E/F | | | | | |
| Sched | dule E/F: Creditors W | ho Have Unsecured | Claims | | | 12/15 |
| schedule): Credito he Contir | Itory contracts or unexpired leases G: Executory Contracts and Unexpors Who Have Claims Secured by Pinuation Page to this page. If you haber (if known). | ired Leases (Official Form 106G). Droperty. If more space is needed, co | o not include oppy the Part yo | any creditors with partially se ou need, fill it out, number the | ecured claims to entries in the | hat are listed in Schedule boxes on the left. Attach |
| Part 1: | List All of Your PRIORITY Un | secured Claims | | | | |
| | ny creditors have priority unsecure | d claims against you? | | | | |
| ■ N | o. Go to Part 2. | | | | | |
| ПΥ | es. | | | | | |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | | | | |
| 3. Do a | ny creditors have nonpriority unsec | cured claims against you? | | | | |
| □N | o. You have nothing to report in this p | art. Submit this form to the court with | your other sche | edules. | | |
| ■ Y | es. | | | | | |
| unse | all of your nonpriority unsecured cl cured claim, list the creditor separately one creditor holds a particular claim, i | y for each claim. For each claim listed | l, identify what t | type of claim it is. Do not list cla | ims already incl | uded in Part 1. If more |
| | | | | | | Total claim |
| 4.1 | Capital One | Last 4 digits of acc | ount number | 1723 | | \$934.00 |
| | Nonpriority Creditor's Name | | | | | 400.100 |
| | 45000 Camital Co D. | When was the deb | t incurred? | 2009-10 | | - |
| | 15000 Capital One Dr Richmond, VA 23238-1119 | | | | | |
| _ | Number Street City State Zlp Code | As of the date you | file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | At least one of the debtors and and | • | RITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a com | _ | | | | |
| | debt Is the claim subject to offset? | | | aration agreement or divorce th | at you did not | |
| | ■ No | <u> </u> | | ng plans, and other similar debt | S | |
| | □Yes | Other. Specify | Revolvina | account | | |
| | | - Sulon Spoony | | | | |

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Case number (f know) Document

| 4.2 | | | t Management | Last 4 digits of account number | | 3163 | 3 | \$35,488.00 |
|----------------------|------------------------------|---------|---|--|------------------|----------|--------------------------------------|----------------------------|
| | 11970 B | r an | d Steeno an Dr # 250 | When was the debt incurred? | - | | | _ |
| - | | | MO 63146-4153 ity State ZIp Code | As of the date you file, the claim | ı is: | Check | k all that apply | |
| | | | e debt? Check one. | , | | | ·· •·· ·· •· • _P p· · · | |
| | ■ Debtor 1 | 1 only | | ☐ Contingent | | | | |
| | ☐ Debtor 2 | 2 only | | ☐ Unliquidated | | | | |
| | _ | | Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least | one o | f the debtors and another | Type of NONPRIORITY unsecure | ed c | laim: | | |
| | ☐ Check i | if this | claim is for a community | ☐ Student loans | | | | |
| | debt | | ject to offset? | ☐ Obligations arising out of a sep report as priority claims | ara | tion ag | greement or divorce that you did not | |
| | ■ No | | | ☐ Debts to pension or profit-shari | ing _l | olans, a | and other similar debts | |
| | ☐ Yes | | | Other. Specify | | | | _ |
| 4.3 | | | nr. Cooper | Last 4 digits of account number | | 2401 | <u> </u> | \$205,173.00 |
| | Nonpriority | Credit | tor's Name | When was the debt incurred? | | 2004 | 1_0/ | |
| | 350 High | | d Dr X 75067-4177 | when was the dest mounted. | - | 2004 | 1-04 | _ |
| | | | ty State Zlp Code | As of the date you file, the claim | ı is: | Check | k all that apply | |
| | Who incur | red th | e debt? Check one. | | | | | |
| | ■ Debtor 1 | 1 only | | ☐ Contingent | | | | |
| | Debtor 2 | 2 only | | ☐ Unliquidated | | | | |
| | Debtor 1 | 1 and | Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least | one o | f the debtors and another | Type of NONPRIORITY unsecure | ed c | laim: | | |
| | | if this | claim is for a community | ☐ Student loans | | | | |
| | debt Is the clain | n subj | ject to offset? | ☐ Obligations arising out of a sep report as priority claims | ara | tion ag | greement or divorce that you did not | |
| | ■ No | | | Debts to pension or profit-shari | ing | olans, a | and other similar debts | |
| | ☐ Yes | | | Other. Specify Mortgage | ас | coun | nt | _ |
| Part 3: | List Otl | hers | to Be Notified About a Debt Th | at You Already Listed | | | | |
| is tryii have r | ng to collect nore than o | t from | you for a debt you owe to somed | t your bankruptcy, for a debt that yone else, list the original creditor in a listed in Parts 1 or 2, list the addiomit this page. | n Pa | arts 1 c | or 2, then list the collection agend | cy here. Similarly, if you |
| Part 4: | Add the | e Am | ounts for Each Type of Unsec | ured Claim | | | | |
| | the amounts of unsecured | | | This information is for statistical r | rep | orting | purposes only. 28 U.S.C. §159. Ad | dd the amounts for each |
| | | | | | | | Total Claim | |
| | | 6a. | Domestic support obligations | | | 6a. | \$0.0 | 0 |
| Total cla from Pa | | 6b. | Taxes and certain other debts you | I owe the government | | 6b. | \$ 0.0 | in |
| | | | Claims for death or personal injur | - | | 6c. | \$ 0.0 | |
| | | 6d. | Other. Add all other priority unsecu | red claims. Write that amount here. | | 6d. | \$ 0.0 | |
| | | 6e. | Total Priority. Add lines 6a through | 6d. | | 6e. | \$ | 0 |
| | | | | | | | Total Claim | |
| | | 6f. | Student loans | | | 6f. | \$0.0 | 0 |
| Total cla | | | Obligations arising out of a separ you did not report as priority clair | | | 6g. | \$ 0.0 | 0 |

Debtor 1 Mariani, Katie L

6h.

Debts to pension or profit-sharing plans, and other similar debts

0.00

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Debtor 1 Mariani, Katie L

Other. Add all other nonpriority unsecured claims. Write that amount 241,595.00 \$ here. Total Nonpriority. Add lines 6f through 6i. 6j. 241,595.00

Official Form 106 E/F

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| | | | 111 FAUE / 4 UI 44 | |
|---|-------------------------|-------------------|-------------------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Katie L Mariani | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVISION | |
| Case number (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Numbe | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | <u> </u> |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

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| | | Docume | ent Page 25 d | ot 44 | |
|--|--|--|--|---|-------|
| Fill in this in | nformation to identify your | case: | | | |
| Debtor 1 | Katia I Mariani | | | | |
| Deploi | Katie L Mariani First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTER | RN DIVISION | |
| Case number | 2r | | | | |
| (if known) | | | | ☐ Check if this is an | |
| | | | | amended filing | |
| | | | | | |
| Official | Form 106H | | | | |
| Schedi | ule H: Your Cod | ehtors | | 12/15 | |
| ocneat | ale II. Ioui oou | CDIOIS | | 12/13 | _ |
| ■ No □ Yes 2. Within Californ ■ No. C □ Yes. 3. In Colum | ia, Idaho, Louisiana, Nevada Go to line 3. Did your spouse, former spou mn 1, list all of your codebt | lived in a community pro New Mexico, Puerto Rico, se, or legal equivalent live w | pperty state or territory Texas, Washington, ar ith you at the time? | y? (Community property states and territories include Arizonand Wisconsin.) If your spouse is filing with you. List the person shown i | n |
| | Schedule E/F (Official Form | | | e you have listed the creditor on Schedule D (Official Fo se Schedule D, Schedule E/F, or Schedule G to fill out | r I I |
| | olumn 1: Your codebtor ame, Number, Street, City, State and 2 | ID Codo | | Column 2: The creditor to whom you owe the debt | |
| INA | ame, Number, Street, Oily, State and 2 | ii Oout | | Check all schedules that apply: | |
| 3.1 | | | | ☐ Schedule D, line | |
| | ame | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | | | | | |
| | umber Street | Ctata | ZID Code | | |
| C | ity | State | ZIP Code | | |
| | | | | | _ |
| 3.2 | | | | ☐ Schedule D, line | |
| N | ame | <u> </u> | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| N | umber Street | | | _ | |
| | ity | State | ZIP Code | | |

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| Fill | in this information to identify your ca | ase: | | | | | | | |
|--------------------|--|--|---|-----------------------------|--|--|-------------------------|------------------------------|--------------|
| | btor 1 Katie L Mar | | | | $ _ $ | | | | |
| _ | obtor 2 ouse, if filing) | | | | - | | | | |
| Uni | ited States Bankruptcy Court for the | NORTHERN DISTRIC | CT OF ILLINOIS, E | ASTERN | _ | | | | |
| | se number nown) | | | | | Check if this is: An amended A supplement income as of | ed filing ent showin | | chapter 13 |
| 0 | fficial Form 106l | | | | | MM / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 |
| sup spo atta | as complete and accurate as poss oplying correct information. If you buse. If you are separated and you ach a separate sheet to this form. On the complex of | are married and not filing spouse is not filing with | g jointly, and you h you, do not inc | r spouse is lude informa | living ition a | ywith you, includation included the poor with the poor wit | de inform se. If moi | ation about yere space is ne | our eded, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-f | iling spouse | |
| | If you have more than one job, | Employment status* | ■ Employed | | | ☐ Empl | ☐ Employed | | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | | ☐ Not e | mployed | | |
| | employers. | Occupation | See Schedul | See Schedule Attached | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | |
| | Occupation may include student of homemaker, if it applies. | _r Employer's address | | | | | | | |
| Par | rt 2: Give Details About Mor | How long employed th | | Attachment | for A | dditional Employ | ment Inf | ormation | |
| Esti | imate monthly income as of the da | | ou have nothing to | report for any | / line, | write \$0 in the spa | ace. Includ | de your non-filir | ng spouse |
| | ou or your non-filing spouse have mor ce, attach a separate sheet to this for | | pine the information | n for all emplo | yers t | or that person on | the lines b | oelow. If you ne | eed more |
| | | | | | | For Debtor 1 | | ebtor 2 or ling spouse | |
| 2. | List monthly gross wages, salar deductions). If not paid monthly, c | | | 2. | \$_ | 2,708.33 | \$ | N/A | |
| 3. | Estimate and list monthly overti | me pay. | | 3. | +\$_ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add lin | e 2 + line 3. | | 4. | \$_ | 2,708.33 | \$_ | N/A | |

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| Deb | tor 1 | Mariani, Katie L | _ | С | ase number (if I | known) | | | |
|-----|--------------------|---|--------|-----|------------------|--------|------|----------------------------|----------|
| | | | | | For Debtor 1 | | | ebtor 2 or iling spouse | |
| | Cop | by line 4 here | 4. | - 7 | \$2,70 | 8.33 | \$ | N/A | |
| 5. | List | t all payroll deductions: | | | | | | | |
| - | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ | 0.00 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | | 0.00 | \$ | N/A | - |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | . — | 0.00 | \$ | N/A | - |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ | 0.00 | \$ | N/A | - |
| | 5e. | Insurance | 5e. | | \$ | 0.00 | \$ | N/A | • |
| | 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | \$ | N/A | - |
| | 5g. | Union dues | 5g | | | 0.00 | \$ | N/A | _ |
| | 5h. | Other deductions. Specify: | 5h | .+ | \$ | 0.00 | + \$ | N/A | |
| 6. | Add | d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | 9 | S | 0.00 | \$ | N/A | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | 9 | 2,70 | 8.33 | \$ | N/A | - |
| 8. | List 8a. | t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b | | · | 0.00 | \$ | N/A | - |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | _ | | 0.00 | \$ | N/A | - |
| | 8d. | Unemployment compensation | 8d | | \$ | 0.00 | \$ | N/A | - |
| | 8e. | Social Security | 8e. | | \$ | 0.00 | \$ | N/A | - |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | | 0.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | 8g | | \$ 80 | 0.00 | \$ | N/A | _ |
| | 8h. | Other monthly income. Specify: | 8h | .+ | \$ | 0.00 | + \$ | N/A | |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 80 | 0.00 | \$ | N/A | |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 3,508.33 | + \$ | | N/A = \$ | 3,508.33 |
| | | If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | 0,000.00 | j Ľ | | | 0,000.00 |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avecify: | epende | | • | - | | e J. 11. +\$ | 0.00 |
| 12. | | d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | | 12. \$ | 3,508.33 |
| 4.5 | _ | | _ | | | | | | y income |
| 13. | Do ' | you expect an increase or decrease within the year after you file this form No. Yes. Explain: | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Debtor 1 Mariani, Katie L Case number (if known) | |
|--|--|
|--|--|

Official Form B 6I Attachment for Additional Employment Information

| Debtor | | |
|---------------------|-----------------------------|--|
| Occupation | dental assistant | |
| Name of Employer | DiFranco Dental Specialists | |
| How long employed | 8 months | |
| Address of Employer | 10059 S Roberts Rd | |
| | Palos Hills, IL 60465-1691 | |
| Debtor | | |
| Occupation | Dental Assistant | |
| Name of Employer | PED Orthodontics Inc | |
| How long employed | 8 months | |
| Address of Employer | 10059 S Roberts Rd | |
| | Palos Hills, IL 60465-1691 | |

Official Form 106I Schedule I: Your Income page 3

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| Fillip | this informa | tion to identify you | ir case. | | | | | |
|---------|------------------------------------|---|----------------|--|----------------------|-------------|------------------------------------|-------------------------------|
| Debto | | | | | | 0: | and if this is: | |
| Debio | 1 1 | Katie L Maria | ını | | | | eck if this is: An amended filing | |
| Debto | r 2 se, if filing) | | | | | | A supplement show | wing postpetition chapter 13 |
| | | | NODTI | IEDN DIOTDIOT OF ILLIN | 010 | | · | Tollowing date. |
| United | l States Bankr | uptcy Court for the: | | IERN DISTRICT OF ILLIN RN DIVISION | OIS, | | MM / DD / YYYY | |
| Case | number | | | | | | | |
| (If kno | wn) | | | | | | | |
| ∩ff | icial Fo | rm 106J | , | | | | | |
| | | J: Your E | Exnen | 202 | | | | 12/1 |
| | | | | f two married people are | filing together, bot | h are equa | ally responsible for | |
| infor | mation. If m | | ded, attac | | | | | our name and case numbe |
| Part 1 | Descr | ibe Your Househ | old | | | | | |
| | ls this a join | | | | | | | |
| | ■ No. Go to □ Yes. Doe s | line 2. s Debtor 2 live in | a separa | te household? | | | | |
| | □ N □ Y | | file Offici | al Form 106J-2, <i>Expen</i> ses | for Separate Househ | noldof Debt | or 2. | |
| 2. I | Do you have | e dependents? | □No | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Daughter | | 16 | ■ Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | _ | . □ No |
| | | | | | | | _ | Yes |
| | | | | | | | | □ No |
| 3. I | Do vour exp | enses include | _ | No | - | | _ | Yes |
| | expenses of | people other that your dependen | an $_{f \Box}$ | No Yes | | | | |
| | | | | | | | | |
| | nate your ex | | ur bankru | ptcy filing date unless yo | | | | |
| | nses as of a cable date. | date after the ba | ankruptcy | is filed. If this is a supple | emental Schedule J | , check th | e box at the top of | the form and fill in the |
| Inclu | de expense: | s paid for with no | on-cash d | overnment assistance if | vou know the | | | |
| value | | sistance and hav | | d it on Schedule I: Your I | | | Your exp | penses |
| (Onic | , ai i 0i iii i 0 | 01.) | | | | | | |
| | | r home ownersh d any rent for the ເ | | ses for your residence. In lot. | clude first mortgage | 4. | \$ | 1,100.00 |
| ı | If not includ | ed in line 4: | | | | | | |
| 4 | 4a. Real e | state taxes | | | | 4a. | \$ | 0.00 |
| | • | rty, homeowner's, | | | | 4b. | | 0.00 |
| | | maintenance, rep owner's association | | | | 4c. 4d. | | 0.00 |
| | | | | ominium dues ur residence, such as hon | ne equity loans | 4a. 5. | | 0.00 |

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| Debtor 1 | Mariani, Katie L | Case num | ber (if known) | |
|-----------------|--|----------|----------------|----------------------------|
| 6. Uti l | ities: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 90.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 180.00 |
| 6d. | Other. Specify: cell phones | 6d. | \$ | 218.00 |
| 7. Fo | od and housekeeping supplies | 7. | \$ | 700.00 |
| 8. Ch i | Idcare and children's education costs | 8. | \$ | 0.00 |
| 9. Clo | thing, laundry, and dry cleaning | 9. | \$ | 250.00 |
| 10. Pe r | sonal care products and services | 10. | \$ | 20.00 |
| 11. Me | dical and dental expenses | 11. | \$ | 35.00 |
| 12. Tra | nsportation. Include gas, maintenance, bus or train fare. | | | |
| | not include car payments. | 12. | \$ | 250.00 |
| 13. En t | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| 14. Ch | aritable contributions and religious donations | 14. | \$ | 0.00 |
| 15. Ins | urance. | | | |
| | not include insurance deducted from your pay or included in lines 4 or 20. | | • | |
| | . Life insurance | 15a. | | 0.00 |
| | . Health insurance | 15b. | · | 250.00 |
| | . Vehicle insurance | 15c. | \$ | 142.00 |
| | l. Other insurance. Specify: | 15d. | \$ | 0.00 |
| | tes. Do not include taxes deducted from your pay or included in lines 4 or 20. | 4.0 | • | |
| | ecify: | 16. | \$ | 0.00 |
| | tallment or lease payments: | 17a. | c | 200.00 |
| | Car payments for Vehicle 1 | | · | 389.00 |
| | Car payments for Vehicle 2 | 17b. | · : ——— | 0.00 |
| | Other Specify: | 17c. | \$ | 0.00 |
| | l. Other. Specify: | 17d. | \$ | 0.00 |
| | ur payments of alimony, maintenance, and support that you did not report as lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| | er payments you make to support others who do not live with you. | | \$ | 0.00 |
| | ecify: | 19. | | 0.00 |
| | er real property expenses not included in lines 4 or 5 of this form or on Scheo | | r Income. | |
| 20a | | 20a. | | 0.00 |
| 20b | . Real estate taxes | 20b. | \$ | 0.00 |
| 200 | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 200 | I. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | . Homeowner's association or condominium dues | 20e. | · | 0.00 |
| 1. Oth | er: Specify: Daughter's tuition/school exp | | +\$ | 50.00 |
| | | | | 30.00 |
| | culate your monthly expenses | | | |
| | a. Add lines 4 through 21. | | \$ | 3,674.00 |
| 22b | c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 220 | . Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,674.00 |
| 3 C al | culate your monthly net income. | | | |
| 3. Ca i | | 23a. | \$ | 3,508.33 |
| | Copy your monthly expenses from line 22c above. | 23b. | | 3,674.00 |
| 201 | . Sopy your monthly expended from the 220 above. | 200. | | 3,074.00 |
| 230 | Subtract your monthly expenses from your monthly income. | | | |
| 200 | The result is your <i>monthly net income</i> . | 23c. | \$ | -165.67 |
| | · / · · · · · / · · · · · · · | | | |
| For | you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you lification to the terms of your mortgage? | | | e or decrease because of a |
| | No. | | | |
| | | | | |

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| Fill in this inform | nation to identify your | case: | | | |
|---------------------------------|---|---------------------------|----------------------------|---------------------------|--|
| Debtor 1 | | ouse. | | | |
| Debior 1 | Katie L Mariani First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| | | | | D11 1101011 | |
| United States Bai | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN | DIVISION | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official Form | | an Individual | Debtor's Sc | hedules | 12/15 |
| | | | | | |
| · | 3 U.S.C. §§ 152, 1341, 1 n Below | | | | |
| Did you pay | or agree to pay some | one who is NOT an attorn | ey to help you fill out ba | nkruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | lame of person | | | | Petition Preparer's Notice, Signature (Official Form 119) |
| • | ty of perjury, I declare true and correct. | that I have read the sumn | nary and schedules filed | with this declaration and | |
| X /s/ Kati | e L Mariani | | X | | |
| Katie L | . Mariani e of Debtor 1 | | Signature of I | Debtor 2 | |
| Date 🗜 | April 14, 2018 | | Date | | |

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| | | DOCUME | ni Page 37 of 44 | |
|---|-------------------------|-------------------|-------------------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Katie L Mariani | | | |
| | First Name | Middle Name | Last Name |) |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVISION | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| - | | | |
|-----|---|--------------|--------------------------|
| Par | t 1: Summarize Your Assets | | |
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 22,800.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 22,800.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | iabilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 25,644.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j @schedule E/F | \$ | 241,595.00 |
| | Your total liabilities | \$ | 267,239.00 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I | \$ | 3,508.33 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,674.00 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other. | her schedu | ıles. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159. | ersonal, far | mily, or household |

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$_ | 2,708.33 |
|----|--|-----|----------|
| | | | |

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Bort 4 on Colombia E/E against a fall and an | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| | in this infor | mation to identify your | case: | | | | | |
|------------------------------------|------------------|--|--|---|---|---|--|--|
| Del | btor 1 | Katie L Mariani First Name | Middle Name | Last Name | | | | |
| Del | btor 2 | Filst Name | Middle Name | Last Name | | | | |
| | ouse if, filing) | First Name | Middle Name | Last Name | | | | |
| Uni | ited States Ba | ankruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS, EASTERN DIVI | SION | | | |
| Cas | se number | | | | | | | |
| (if kr | nown) | | | | | heck if this is an mended filing | | |
| | | | | | | · · | | |
| Of | ficial Fo | rm 107 | | | | | | |
| | | | Affairs for Individ | luals Filing for B | ankruntov | 4/16 | | |
| | | | | | | | | |
| | | | | | ually responsible for supply dditional pages, write your r | | | |
| (if k | nown). Ansv | er every question. | | | | | | |
| Pai | rt 1: Give | Details About Your Ma | rital Status and Where You | Lived Before | | | | |
| 1. | What is you | ır current marital statu | s? | | | | | |
| | ☐ Marrie | d | | | | | | |
| | ■ Not ma | | | | | | | |
| 2. | During the | uring the last 3 years, have you lived anywhere other than where you live now? | | | | | | |
| | | _ | | | | | | |
| | ■ No | at all of the places you liv | and in the leat 2 years. Do not i | naluda whara yau liya naw | | | | |
| | L Tes. Li | st all of the places you liv | ed in the last 3 years. Do not i | ncidde where you live now. | | | | |
| | Debtor 1 P | rior Address: | Dates Debtor 1 l | ived Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | |
| 2 | Within the I | aet 8 veare did vou ev | er live with a spouse or leas | al equivalent in a communit | property state or territory? | (Community property | | |
| state | | | | | o, Texas, Washington and Wis | | | |
| | ■ N. | | | | | | | |
| | ■ No □ Yes M | ake sure you fill out <i>Sch</i> e | edule H: Your Codebtors (Offic | cial Form 106H) | | | | |
| | | and dare you im dat dorn | Sualo II. Tour Goudeliore (Gill | 5.a. i 5.iii 1001i). | | | | |
| Par | t 2 Expla | in the Sources of You | r Income | | | | | |
| 4. | Fill in the tot | al amount of income you | nployment or from operating u received from all jobs and a lave income that you receive to | Il businesses, including part-t | | ar years? | | |
| | _ | ing a joint oddo and you i | ave moone that you receive to | gether, het it orny office under t | Social 1. | | | |
| | □ No | | | | | | | |
| | ■ Yes. F | II in the details. | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| Fro | om January 1 | of current year until | ■ Wages, commissions, | \$8,400.00 | ☐ Wages, commissions, | | | |
| the date you filed for bankruptcy: | | | bonuses, tips | , , , , , , , , , , , , , , , , , , , | bonuses, tips | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | |

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Case number (if known) Debtor 1 Mariani, Katie L

| | Debtor 1 | | Debtor 2 | |
|--|---|---|--|--|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inco Check all that ap | |
| For last calendar year: (January 1 to December 31, 2017 | Wages, commissions, bonuses, tips | \$16,471.00 | ☐ Wages, comm bonuses, tips | nissions, |
| | Operating a business | | ☐ Operating a b | usiness |
| For the calendar year before that (January 1 to December 31, 2016 | | \$15,000.00 | ☐ Wages, comm | nissions, |
| | ☐ Operating a business | | ☐ Operating a b | usiness |
| Include income regardless of w other public benefit payments; p you are filing a joint case and yo | | mples of other income are alim lividends; money collected from ogether, list it only once under l | lawsuits; royalties; a Debtor 1. | Social Security, unemployment, anand gambling and lottery winnings. |
| | | | | |
| | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of inco Describe below. | me Gross income (before deductions and exclusions) |
| From January 1 of current year ι the date you filed for bankruptcy | | \$2,400.00 | | |
| For last calendar year: (January 1 to December 31, 2017 | pension | \$9,600.00 | | |
| For the calendar year before that (January 1 to December 31, 2016 | | \$9,600.00 | | |
| Part 3: List Certain Payments | You Made Before You Filed for | Bankruptcy | | |
| • | | | | |
| ☐ No. Neither Debtor 1 r | tor 2's debts primarily consumer nor Debtor 2 has primarily const for a personal, family, or household | umer debts. Consumer debts | are defined in 11 U.S | S.C. § 101(8) as "incurred by an |
| □ No. Go to | before you filed for bankruptcy, did line 7. | d you pay any creditor a total of | \$6,425* or more? | |
| credito | elow each creditor to whom you paid or. Do not include payments for do ents to an attorney for this bankrupt | mestic support obligations, su | | s and the total amount you paid that and alimony. Also, do not include |
| | tment on 4/01/19 and every 3 years | | after the date of adju | ustment. |
| | or 2 or both have primarily consumers before you filed for bankruptcy, dictional states of the consumers of | | \$600 or more? | |
| ■ No. Go to | line 7. | | | |
| ☐ Yes List be payme | elow each creditor to whom you paid | | | paid that creditor. Do not include include payments to an attorney for |
| Creditor's Name and Addres | ss Dates of paym | ent Total amount | Amount you still owe | Was this payment for |

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Debtor 1 Case number (if known) Mariani, Katie L Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe paid 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider Reason for this payment Insider's Name and Address Dates of payment Total amount Amount you Include creditor's name paid still owe Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Value of the Describe the Property Date property Explain what happened **Crown Asset Management** 3/2018 \$0.00 11970 Borman Dr Ste 250 □ Property was repossessed. Saint Louis. MO 63146-4153 Property was foreclosed. Property was garnished. □ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount taken Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο

Yes

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| Par | List Certain Gifts and Contributions | S | | | |
|-----|---|----------|--|---|------------------------|
| 13. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift. | iptcy, d | did you give any gifts with a total value of more th | an \$600 per person? | |
| | Gifts with a total value of more than \$600 person Person to Whom You Gave the Gift and |) per | Describe the gifts | Dates you gave the gifts | Value |
| | Address: | | | | |
| 14. | Within 2 years before you filed for bankrum■ No□ Yes. Fill in the details for each gift or co | , | did you give any gifts or contributions with a total | value of more than \$ | 600 to any charity? |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | | Describe what you contributed | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? No Yes. Fill in the details. | otcy or | since you filed for bankruptcy, did you lose anyth | ing because of theft, | fire, other disaster, |
| | Describe the property you lost and how the loss occurred | Includ | tibe any insurance coverage for the loss the the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Par | t 7: List Certain Payments or Transfers | | | | |
| 16. | consulted about seeking bankruptcy or p | reparir | id you or anyone else acting on your behalf pay or ng a bankruptcy petition? , or credit counseling agencies for services required in | | y to anyone you |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | ou | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Law Offices of Jeffrey S Harris 1701 S 1st Ave Ste 202 Maywood, IL 60153-2400 | | 1500.00 | 2014 | \$1,500.00 |
| 17. | promised to help you deal with your cred Do not include any payment or transfer that y No | itors o | | transfer any propert | y to anyone who |
| | Yes. Fill in the details. | | Description and value of any property | Date navment or | Amount of |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | payment |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include

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| | gifts and transfers that you have already listed on No | this statement. | | | | |
|-----|--|--|-------------------------------|------------------|---|---|
| | Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | Description and val property transferre | | | ceived or debts | Date transfer was made |
| | Person's relationship to you | | | paid in excha | ange | |
| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protein No | | property to a self | -settled trust o | or similar device of | which you are a |
| | Yes. Fill in the details. | Description and val | of the proper | h, tuanafarrad | | Data Transfer was |
| | Name of trust | Description and val | ue of the proper | ty transferred | | Date Transfer was made |
| Pai | t 8: List of Certain Financial Accounts, Inst | truments, Safe Deposit Bo | exes, and Storag | e Units | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details. | other financial accounts | ; certificates of d | • | , | , , |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | | Type of account instrument | close | account was d, sold, ed, or ferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 yo cash, or other valuables? | ear before you filed for ba | nkruptcy, any s | afe deposit bo | x or other deposito | ry for securities, |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acces Address (Number, Stre and ZIP Code) | | escribe the cor | ntents | Do you still have it? |
| 22. | Have you stored property in a storage unit or | r place other than your ho | ome within 1 yea | r before you fil | ed for bankruptcy? | • |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or ha to it? Address (Number, Stre and ZIP Code) | | escribe the co | ntents | Do you still have it? |
| Pai | t 9: Identify Property You Hold or Control f | for Someone Else | | | | |
| 23. | Do you hold or control any property that son someone. | | any property yo | ou borrowed fr | om, are storing for | or hold in trust for |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the proper (Number, Street, City, State Code) | | escribe the pro | pperty | Value |
| Pai | t 10: Give Details About Environmental Info | rmation | | | | |
| For | the purpose of Part 10, the following definition | ns apply: | | | | |
| | Environmental law means any federal, state, | or local statute or regular | ion concerning | pollution, cont | amination, releases | of hazardous or |

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1

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Case number (if known) Debtor 1 Mariani, Katie L own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name Employer Identification number** Describe the nature of the business **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Dates business existed

Yes. Fill in the details below.

Date Issued Name Address (Number, Street, City, State and ZIP Code)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a Case 18-10941 Doc 1 Filed 04/14/18 Entered 04/14/18 16:00:01 Desc Main Document Page 40 of 44 Case number (if known)

bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Katie L Mariani
Katie L Mariani
Signature of Debtor 1

Date April 14, 2018

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No
Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

☐ Yes. Name of Person_____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor 1

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| Fill in this inform | nation to identify your | case: | | |
|------------------------------------|---------------------------------------|-----------------------|--|----------------------------------|
| Debtor 1 | Katie L Mariani | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| | | | | |
| United States Ba | nkruptcy Court for the: | NORTHERN DIST | RICT OF ILLINOIS, EASTERN DIVISION | |
| Case number _ | | | | |
| (if known) | | _ | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Official Fo | rm 108 | | | |
| | | n for Indiv | iduals Filing Under Chapt | or 7 |
| Statemen | it or intentic | <u> </u> | riduals I lillig Officer Chapte | er 7 12/15 |
| If you are an indi | vidual filing under chap | nter 7 vou must fill | out this form if: | |
| | e claims secured by yo | | | |
| _ | ed personal property a | | t expired | |
| | | | ou file your bankruptcy petition or by the date set | for the meeting of creditors, |
| | | e court extends the | time for cause. You must also send copies to the o | reditors and lessors you list on |
| the forr | m | | | |
| | ople are filing together te the form. | in a joint case, both | n are equally responsible for supplying correct info | rmation. Both debtors must sign |
| Be as complete a | and accurate as possible | e. If more space is r | needed, attach a separate sheet to this form. On the | top of any additional pages. |
| | our name and case nun | | | ,, |
| Dort 4. List Va | aur Craditara Wha Hay | a Casurad Claima | | |
| Part 1: List Yo | our Creditors Who Have | 3 Secured Claims | | |
| | | art 1 of Schedule D: | Creditors Who Have Claims Secured by Property (| Official Form 106D), fill in the |
| information be Identify the cre | elow. editor and the property t | hat is collateral | What do you intend to do with the property that | Did you claim the property |
| | | | secures a debt? | as exempt on Schedule C? |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | □ NO |
| | | | Retain the property and enter into a <i>Reaffirmation</i> | ☐ Yes |
| Description of | | | Agreement. | |
| property | | | Retain the property and [explain]: | |
| securing debt: | | | | <u> </u> |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | — 140 |
| | | | ☐ Retain the property and enter into a <i>Reaffirmation</i> | ☐ Yes |
| Description of | | | Agreement. | |
| property | | | Retain the property and [explain]: | |
| securing debt: | | | | _ |
| Creditor's | | | Currender the present : | □ No |
| name: | | | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ N0 |
| namo. | | | ☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i> | ☐ Yes |
| Description of | | | Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt: | | | | |

Official Form 108

Creditor's

☐ Surrender the property.

☐ No

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| Debtor 1 | Mariani, Katie L | Case number (if known) | |
|--|---|--|---|
| name: Descrip | | ☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation Agreement</i> . ☐ Retain the property and familiarly | ☐ Yes |
| securin | - | ☐ Retain the property and [explain]: | - |
| the inform | nation below. Do not list real estate lea | ty Leases you listed in Schedule G: Executory Contracts and Unexpired L ses. Unexpired leases are leases that are still in effect; the lease ase if the trustee does not assume it. 11 U.S.C. § 365(p)(2). | eases (Official Form 106G), fill in period has not yet ended. You |
| Describe | your unexpired personal property lea | ises | Will the lease be assumed? |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Under per | Sign Below nalty of perjury, I declare that I have in that is subject to an unexpired lease. | dicated my intention about any property of my estate that secu | res a debt and any personal |
| | Katie L Mariani | X | |
| Kat | ie L Mariani ature of Debtor 1 | Signature of Debtor 2 | |
| Date | April 14, 2018 | Date | |

Capital One 15000 Capital One Dr Richmond, VA 23238-1119

Crown Asset Management c/o Miller and Steeno 11970 Borman Dr # 250 Saint Louis, MO 63146-4153

Nationstar/mr. Cooper 350 Highland Dr Lewisville, TX 75067-4177

Toyota Motor Credit PO Box 9786 Cedar Rapids, IA 52409-0004

Case 18-10941 Doc 1 Filed 04/14/18 Entered 04/14/18 16:00:01 Desc Main Document Page 44 of 44 United States Bankruptcy Court Northern District of Illinois, Eastern Division

| IN RE: | | Case No | | |
|-----------------------------|---|---|--|--|
| Mariani, Katie L | | Chapter 7 | | |
| | Debtor(s) | • - | | |
| | VERIFICATION OF CREDI | TOR MATRIX | | |
| | | Number of Creditors4 | | |
| The above-named Debtor(s) h | nereby verifies that the list of creditors is | true and correct to the best of my (our) knowledge. | | |
| Date: April 14, 2018 | /s/ Katie L Mariani | | | |
| | Debtor | | | |
| | | | | |
| | Joint Debtor | | | |